

DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT MODFICATION FOR A SOLID WASTE PROCESSING FACILITY

Address(Street or Rural Route)	(City & State)	(Zip)
Person to contact		
Phone	E-mail	
Current Permit Number		
Summarize the purpose and extent of the	requested modifications.	
summarize the purpose and extent of the	requested modifications.	
Current site area (acres)		
Current area for waste storage (acres)		
Current area for waste storage (acres) Proposed site area (acres)		
Current site area (acres) Current area for waste storage (acres) Proposed site area (acres) Proposed area for waste storage (acres) Attach a copy of the revised "Site Plan".		

The following **maps** must be used and included as part of a site plan:

a. A **site location** map showing section, township, range, and site boundaries. A description

- of adjacent properties including land use, names and addresses of property owners. If proposed site is adjacent to a public road or street include property across the street or road.
- b. A **site layout drawing** showing the size and location of all pertinent constructed and natural features of the site including roads, fire lanes, ditches, berms, culverts, structures, wetlands, floodways, surface waters and projected site utilization including all site structures (such as buildings, fences, gates, entrances and exits, parking areas, on-site roadways, and signs) and the location of all water supplies.
- c. A **FEMA floodplain map** with the site location drawn on it.
- d. A **facilities layout drawing** which shows the arrangement of equipment on the site, storage facilities, traffic flow, and waste storage areas.
- 6. Attach a copy of the revised site operations plan.
 - a. A description or the general operating plan for the proposed facility including the origin, composition, and expected volume of all solid waste to be accepted at the facility, the maximum time any such waste will be stored, and where all waste will be disposed, the proposed capacity of the facility, the proposed operating hours of the facility, and the expected life of the facility;
 - b. a description of all machinery and equipment to be used, including the design capacity;
 - c. a description of the facility's drainage system and water supply system;
- 7. Attach a copy of "**Certificate of Insurance**" for proof of liability of insurance in accordance with KAR 28-29-2201. The coverage shall include coverage of the premises and operations, including operations of independent contractors.
- 8. Attach a copy of the revised "**Closure Plan**" as required by KSA 65-3406. The closure plan shall include:
 - a. When or under what circumstances the site will be closed;
 - b. **How** will the site be properly closed;
 - c. A **schedule** for the applicable closure procedures, including the time period for completing the closure procedures; and
- 9. Attach the completed closure cost estimating worksheet "Closure Cost Estimate Worksheet for Solid Waste Processor" provided by KDHE.
- 10. Private entities are required to submit a financial assurance instrument for the amount calculated on the closure cost estimating worksheet. Allowable financial assurance methods are listed in K.A.R. 28-29-2101. This financial assurance instrument must be received prior to the beginning of the public notice period.
- 11. Attach the completed "**DISCLOSURE STATEMENT**" provided by KDHE.

12.	Comments:			
****	***********	***************		
	Performance Bond Posted (if require	ed by local agency)		
				
	Signature of Applicant	Name (Print or Type)		
	Title	Organization		
	Date			

SOLID WASTE PROCESSING FACILITY CERTIFICATION

Applic	cant's Name					
As spe dispos	ecified in K.S.A. 65-3407 <u>Perral areas</u> , the secretary shall red	nits to construct, alter or opquire the following informa	perate solid waste pro etion as part of this ap	ocessing facilities and solid waste oplication:		
	Solid	Waste Management	Plan Consister	ncy		
(1)	Certification by the board of county commissioners or the mayor of a designated city responsible for the development and adoption of the solid waste management plan for the location where the processing facility or disposal area is or will be located that the processing facility or disposal area is consistent with the plan. This certification shall not apply to a solid waste disposal area for disposal of only solid waste produced on site from manufacturing and industrial processes or from on-site construction or demolition activities.					
	ne Facility Or Disposal Area ne Facility Or Disposal Area		o o			
Name (Pr	int or Type)		Signature			
Title			Date			
County o	r City	Street Address		City, Zip Code		
(2)	If the location is zoned, cert disposal area is consistent v	vith local land use restriction	ng and zoning authorons or, if the location	rity that the processing facility or a is not zoned, certification from a is compatible with surrounding		
Zoned	_					
	<u>.</u> e Facility Or Disposal Area :	Is Consistent With Local	Land Use Restriction	ons Or Zoning		
\Box_{Th}	e Facility Or Disposal Area	Is Not Consistent With Lo	ocal Land Use Restr	rictions Or Zoning		
	e Facility Or Disposal Area	-	S			
└─ Th	e Facility Or Disposal Area	Is Not Compatible With S	Surrounding Land U	Jse		
Name (Pr	int or Type)		Signature			
Title			Date	-		
Agency	or County	Street Address		City, Zip Code		

If a special use permit is required, please attach a copy to this application.